



Complete Summary

GUIDELINE TITLE

Crisis intervention.

BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Crisis intervention. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Aug. 55 p. [46 references]

COMPLETE SUMMARY CONTENT

SCOPE

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INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT

CATEGORIES

IDENTIFYING INFORMATION AND AVAILABILITY

SCOPE

DISEASE/CONDITION(S)

Crises, including:

- Mental health crises (primary focus)
- Developmental, situation, community, or environmental crises (secondary focus)

GUIDELINE CATEGORY

Evaluation

Management

Risk Assessment

CLINICAL SPECIALTY

Family Practice

Nursing

Psychiatry

Psychology

INTENDED USERS

Advanced Practice Nurses
Health Care Providers
Nurses

GUIDELINE OBJECTIVE(S)

- To present nursing best practice guidelines for crisis intervention
- To increase nurses' awareness of their role to deliver effective crisis intervention to meet the needs of clients experiencing a crisis

TARGET POPULATION

Canadian clients experiencing crises

Note: Clients are defined in the guideline as individuals, families, and communities who use crisis intervention services.

INTERVENTIONS AND PRACTICES CONSIDERED

Evaluation/Risk Assessment/Management

1. Awareness/integration of necessary foundational values, beliefs, guiding principles, crisis intervention theory
2. Delivery of crisis intervention based on an integrative framework
3. Therapeutic communication skills
4. Comprehensive holistic assessment
5. Referrals and linkages, as appropriate
6. Short-term follow up
7. Teaching and educating clients, families, colleagues, and the community about crisis intervention and prevention
8. Education, organization and policy approaches and strategies

MAJOR OUTCOMES CONSIDERED

Effectiveness of crisis interventions in managing clients in crisis (i.e. levels of social, occupational, cognitive and behavioural functioning)

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Hand-searches of Published Literature (Primary Sources)
Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Guideline developers conducted an extensive literature search and reviewed relevant research, theoretical frameworks and discussion papers.

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Systematic Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not applicable

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Expert Consensus

DESCRIPTION OF METHODS USED TO FORMULATE THE RECOMMENDATIONS

A panel of nurses with expertise in practice, research and academic sectors was established by the Registered Nurses Association of Ontario (RNAO). The panel defined the scope of the guideline; conducted an extensive literature search and reviewed relevant research, theoretical frameworks and discussion papers; and articulated the values underpinning crisis intervention. The panel then identified an integrative framework built on the work of several crisis theorists within which to present the recommendations for best practice. The panel solicited formal feedback from relevant hospital and community-based stakeholders and consulted with Lee Ann Hoff, Ph.D., RN, author of "People in Crisis: Understanding and Helping, 4th edition," "Creating Excellence in Crisis Care," "People in Crisis: Clinical and Public Health Perspectives, 5th edition," and several other major publications.

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Clinical Validation-Pilot Testing
External Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

A draft guideline was reviewed by representative stakeholders, and the feedback received was incorporated into the final document. The draft nursing best practice guideline was also pilot implemented over an eight-month period in several organizations in Ontario that were identified through a "request for proposal" process conducted by Registered Nurses Association of Ontario (RNAO). The guideline was further refined taking into consideration the pilot site feedback and evaluation results as well as current literature.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Practice Recommendations

Recommendation 1

Crisis intervention is founded on a particular set of values and beliefs, and guiding principles.

Recommendation 2

Knowledge of the three core components of crisis intervention theory (a precipitating event, perception of the event, and the client's usual coping methods) is fundamental to identify clients in crisis.

Recommendation 3

The delivery of crisis intervention is based on an integrative framework.

Recommendation 4

A wide array of therapeutic communication skills is a pre-requisite to effective intervention with clients in crisis.

Recommendation 5

A comprehensive holistic assessment is performed prior to engaging in any plan to resolve crises.

Recommendation 6

Nurses are directly involved in all aspects of crisis intervention including assessment, intervention, referrals and linkages, and short-term follow up.

Recommendation 7

Teaching and educating clients, families, colleagues, and the community about crisis intervention and prevention are essential to promote mental health.

Education Recommendations

Recommendation 8

Education and ongoing learning opportunities are required for nurses to implement best practices in crisis intervention.

Recommendation 9

The core curriculum in nursing education includes the following key components:

- Crisis intervention theory and practice
- Sound knowledge of the principles of the therapeutic relationship, and their application to crisis intervention
- The provision of regular clinical supervision

Organization and Policy Recommendations

Recommendation 10

Organizational commitment to providing quality crisis intervention services is reflected in its mission and vision statements, as well as through allocation of resources to develop, implement, and support the services.

Recommendation 11

To enhance the continuum of crisis care, the organization continuously strives to achieve a collaborative and integrative crisis intervention practice model within an interdisciplinary team.

Recommendation 12

The organization actively advocates for the provision of quality crisis intervention care on multiple levels (individual, family, and community).

Recommendation 13

Nursing best practice guidelines can be successfully implemented only when adequate planning, resources, organizational and administrative support, as well as the appropriate facilitation, exist. An organizational plan for developing and implementing crisis intervention services includes:

- An assessment of organizational readiness and barriers to education
- Involvement of all members (whether in a direct or indirect supportive function) who will contribute to the implementation process

- Dedication of a qualified individual to provide the support needed for the education and implementation process
- Ongoing opportunities for discussion and education to reinforce the importance of best practices
- Opportunities for reflection on personal and organizational experience in implementing guidelines

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

In developing this guideline, the guideline development panel drew their evidence from a variety of sources, including several quantitative and qualitative studies, anecdotal reports, and expert knowledge and experience. Expert consensus was also utilized in this guideline when no other more scientifically formalized knowledge was available. In this way, patterns of knowing, including empirics, ethics, personal knowing and aesthetics, were captured.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

- Guideline implementation is intended to help nurses more effectively manage clients in crisis and increase levels of social, occupational, cognitive and behavioural functioning.
- It is intended that this guideline will enhance the understanding of crisis intervention and standardize its practice, as well as enhance professional nursing practice.
- Crisis intervention is considered to be an effective approach in managing clients in crisis and can reduce hospital admissions.
- Nurses, other health care professionals and administrators who are leading and facilitating practice changes will find this document valuable for the development of policies, procedures, protocols, educational programs, assessment and documentation tools, etc.

POTENTIAL HARMS

Not stated

QUALIFYING STATEMENTS

QUALIFYING STATEMENTS

These best practice guidelines are related only to nursing practice and not intended to take into account fiscal efficiencies. These guidelines are not binding for nurses and their use should be flexible to accommodate client/family wishes

and local circumstances. They neither constitute a liability or discharge from liability. While every effort has been made to ensure the accuracy of the contents at the time of publication, neither the authors nor Registered Nurses Association of Ontario (RNAO) give any guarantee as to the accuracy of the information contained in them nor accept any liability, with respect to loss, damage, injury or expense arising from any such errors or omission in the contents of this work. Any reference throughout the document to specific pharmaceutical products as examples does not imply endorsement of any of these products.

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

Toolkit:

Implementing Clinical Practice Guidelines

Nursing best practice guidelines can be successfully implemented only where there are adequate planning, resources, organizational and administrative support, as well as the appropriate facilitation. In this regard, Registered Nurses Association of Ontario (RNAO) (through a panel of nurses, researchers and administrators) has developed The Toolkit for Implementing Clinical Practice Guidelines, based on available evidence, theoretical perspectives and consensus. The Toolkit is recommended for guiding the implementation of any clinical practice guideline in a health care organization.

The "Toolkit" provides step by step directions to individuals and groups involved in planning, coordinating, and facilitating the guideline implementation. Specifically, the "Toolkit" addresses the following key steps:

1. Identifying a well-developed, evidence-based clinical practice guideline
2. Identification, assessment and engagement of stakeholders
3. Assessment of environmental readiness for guideline implementation
4. Identifying and planning evidence-based implementation strategies
5. Planning and implementing evaluation
6. Identifying and securing required resources for implementation

Implementing guidelines in practice that result in successful practice changes and positive clinical impact is a complex undertaking. The "Toolkit" is one key resource for managing this process.

For specific recommendations regarding implementation of this guideline, refer to the "Major Recommendations" field.

Evaluation and Monitoring

Organizations implementing the recommendations in this nursing best practice guideline are recommended to consider how the implementation and its impact will be monitored and evaluated. A table in the original guideline document, based on a framework outlined in the RNAO Toolkit: Implementation of Clinical Practice Guidelines (2002), illustrates some indicators for monitoring and evaluation.

IMPLEMENTATION TOOLS

Patient Resources
Tool Kits

For information about [availability](#), see the "Availability of Companion Documents" and "Patient Resources" fields below.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Getting Better

IOM DOMAIN

Effectiveness
Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Crisis intervention. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Aug. 55 p. [46 references]

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2002 Aug

GUIDELINE DEVELOPER(S)

Registered Nurses Association of Ontario - Professional Association

SOURCE(S) OF FUNDING

Funding was provided by the Ontario Ministry of Health and Long Term Care.

GUIDELINE COMMITTEE

Not stated

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

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FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

The Registered Nurses Association of Ontario (RNAO) received funding from the Ministry of Health and Long-Term Care (MOHLTC). This guideline was developed by a panel of nurses and researchers convened by the RNAO and conducting its work independent of any bias or influence from the MOHLTC.

GUIDELINE STATUS

This is the current release of the guideline.

GUIDELINE AVAILABILITY

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

AVAILABILITY OF COMPANION DOCUMENTS

The following is available:

- Toolkit: implementation of clinical practice guidelines. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jan. 91 p.

Electronic copies: Available in Portable Document Format (PDF) from the [RNAO Web site](#)

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

PATIENT RESOURCES

The following is available:

- Health information fact sheet. Understanding crisis. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2003 Nov. 2 p.

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

Please note: This patient information is intended to provide health professionals with information to share with their patients to help them better understand their health and their diagnosed disorders. By providing access to this patient information, it is not the intention of NGC to provide specific medical advice for particular patients. Rather we urge patients and their representatives to review this material and then to consult with a licensed health professional for evaluation of treatment options suitable for them as well as for diagnosis and answers to their personal medical questions. This patient information has been derived and prepared from a guideline for health care professionals included on NGC by the authors or publishers of that original guideline. The patient information is not reviewed by NGC to establish whether or not it accurately reflects the original guideline's content.

NGC STATUS

This NGC summary was completed by ECRI on December 17, 2003. The information was verified by the guideline developer on January 16, 2004.

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